

## **Request for Qualifications**

### **Vocational/Occupational Skills Training**

The Workforce Innovation and Opportunity Act (WIOA) emphasizes engaging employers across the workforce system to align training with needed skills and match employers with qualified workers. The purpose of this Request for Qualifications (RFQ) is to increase the availability of training to WIOA system customers by creating a list of training providers that can provide vocational/occupational skills training in local selected priority sectors (Healthcare and Manufacturing) that lead to industry-recognized post-secondary credential/certificate, opportunities for work experience, and competencies and skills recognized by employers in the Inland Empire.

### **Scope of Desired Services**

The San Bernardino County and Riverside County Workforce Development Boards (WDBs) are seeking training providers that have the ability to provide the following services:

1. Timely development of curriculum that meets the needs of selected in-demand industry sectors, based on feedback provided directly from industry employers, WDB Industry Sector Coordinators, and other WDB experts.
2. Training that results in industry-recognized credential, licensing, or certificate, as defined through feedback gathered from employers in the Inland Empire.
3. Training that includes soft-skills training, such as punctuality, attendance, problem solving, customer service, effective communication skills, conflict resolution, interpersonal negotiation, etc.
4. Training that includes other competencies and skills development as defined through feedback gathered from employers in the Inland Empire.
5. Training that includes work based learning, on-the-job training or apprenticeships.
6. Training that includes innovative components such as web-based learning.
7. Training facilities/services within San Bernardino and Riverside County, within reasonable traveling distance from the counties, or with online components.
8. Assessments of participant qualifications and eligibility for employment in the sector of training, including but not limited to, skill assessment, pre-qualification screening, drug tests, and background checks.
9. Performance accountability with measurable outcomes regarding training participants.
10. Placement of trainees in related employment upon completion of training in coordination with WDB staff.

## **Applicant Requirements**

Eligible applicants under this RFQ must register on San Bernardino County's Electronic Procurement Network (ePro), and demonstrate that they are training providers with the requisite experience in the above scope of services and including the following:

1. Necessary accreditation, approvals, and licenses required to operate the proposed training program(s).
2. Substantial knowledge and experience in successfully developing curriculum, training materials and providing customized training in selected in-demand industry sectors.
3. Ability to provide qualifications of the individuals who will be working on the trainings, describing previous experience on similar projects in similar roles, and education background.
4. Experience providing vocational/occupational skills training to adults and dislocated workers.
5. Ability to build strong, positive working relationships with business representative(s) in order to develop training materials.
6. Ability to work with the WDBs, County staff, and Industry Representatives to clarify proposed project impacts, outcomes and activities.
7. Ability to compile data and outcomes of trainings in an organized and timely manner, and have proven employment placement strategies.
8. Ability to maintain adequate files and records and meet statistical reporting requirements.
9. Administrative and fiscal capability to provide and manage proposed services and to ensure an adequate audit trail.
10. No record of unsatisfactory performance with either county. Applicants who are or have been seriously deficient in contract performance, in the absence of circumstances properly beyond the control of the applicant, shall be presumed to be unable to meet this requirement.

## **Submission Requirements**

Completed Statements of Qualifications (SOQ) must be typewritten in Arial size 12 font on 8 ½" X 11" white paper (one-sided pages) bound by one staple or binder clip on top, left-hand corner. Narrative responses are limited to a total of five pages and there is no limit to attachments. SOQs should not be submitted in binders or covers.

To assist the WDBs in the evaluation, applicants who wish to apply should submit the following:

1. Experience and Background – Please describe the experience and background of the applicant including, but not limited to, a description on why the applicant is qualified to conduct vocational training. Describe any specific experience the applicant has in delivering training for the manufacturing and/or healthcare industry.
2. Curriculum Development Plan – Please describe how the applicant will develop curriculum when the need arises and provide each of the Scope of Desired Services as described in this RFQ, including pertinent information regarding experience in these areas.

3. Personnel – Please provide a complete and current resume for each individual that will be involved in the development of curriculum.
4. Letters of Reference – Applicants must include two letters of reference from other contracted entities that were served within the last five years. Reference letters must be on referring agency letterhead and provide details of the services that were provided and outcomes obtained. Letters should also include contact information for use by the WDB contract review team during the evaluation period.
5. Completed Statement of Qualifications Summary Cover Sheet (attached)
6. Four copies of the SOQ, of which one must bear original signatures, should be submitted with the attached program Statement of Qualifications Summary Cover Sheet to:

San Bernardino County Workforce Development Board  
Workforce Development Department  
Administration  
Stephanie Murillo  
290 North D Street, Suite 600  
San Bernardino, CA 92415

All Statements of Qualifications must be received no later than 4:00 PM April 27, 2016. Statements of Qualifications will be accepted by hand-delivery, US postal Service mail, or mail courier services only. Statements of Qualifications will not be accepted via e-mail or fax.

### **Applicant Interviews**

Staff may conduct interviews with applicant's staff to determine the applicant's capabilities in providing proposed services

### **Questions**

Questions regarding the requirements and contents of this RFQ must be submitted through the Purchasing website ePro at <https://epro.sbcounty.gov/epro/> on or *before 5:00 PM on Tuesday, April 19, 2016*.

Responses will be available by Thursday, April 21, 2016.

### **Correspondence**

All correspondence is to be submitted to:

San Bernardino County Workforce Development Board  
Workforce Development Department  
Attn: Stephanie Murillo  
290 N D Street, Suite 600 San Bernardino, CA 92415  
(909)387-9831 Phone (909) 889-2848 Fax  
[Smurillo@wdd.sbcounty.gov](mailto:Smurillo@wdd.sbcounty.gov) Email

The individual identified above is the sole contact point for any inquiries or information relating to this RFQ.

**Timeline**

Request for Qualifications Released	April 12, 2016
Question Deadline	April 19, 2016
Statements of Qualifications Due	April 27, 2016

Please note that the submission of an SOQ does not guarantee that funds are available for the proposed service. The WDBs will periodically evaluate responses to this RFQ and may enter into contracts from time to time, with selected organizations based upon the need for specific services and the availability of funding. An applicant's acceptance of a copy of this RFQ shall constitute knowledge and acceptance of all conditions contained herein. All SOQs become the property of the San Bernardino County Workforce Development Department and the San Bernardino County WDB. San Bernardino County WDB incurs no obligation to return or duplicate copies of the SOQ to the submitter.

**Statement of Qualification Summary Cover Sheet**

<b>Applicant Information</b>	
Agency Name:	
Agency Address:	
Program Name:	
Program Contact Person:	
Telephone #:	
Fax #:	
Email:	
Contract Signatory:	
Telephone #:	
Email:	
Federal ID#:	

<b>Agency Status</b>	
Years in Operation:	
<b>Check Appropriate Box:</b>	
Public Non Profit	<input type="checkbox"/>
Private Non-Profit	<input type="checkbox"/>
Government	<input type="checkbox"/>
Corporation	<input type="checkbox"/>
Private For-Profit	<input type="checkbox"/>
Other	<input type="checkbox"/>

**Program Description.** Briefly summarize the proposed program: \_\_\_\_\_

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*In compliance with the request for qualifications format, and subject to the conditions thereof, the undersigned offers to furnish the services requested and certifies he has read, understands, and agrees to all terms, conditions, and requirements of this request for qualifications and is authorized to contract on behalf of the firm named above should the need arise.*

**Signature of Authorized Representative:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_